

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	Almada Stephen J
Title	Abdominal Exercise Station
Art Unit	
Examiner Name	
Attorney Docket Number	HSIC - Z

I hereby appoint:

 Practitioners associated with the Customer Number:

OR

 Practitioner(s) named below:

Name	Registration Number
MATTHEW PASURKA	42,981

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

 The address associated with the above-mentioned Customer Number:

OR

 The address associated with Customer Number:

OR

<input checked="" type="checkbox"/>	Firm or Individual Name	MATTHEW PASURKA			
Address	8 TLC Hwy 71				
Address					
City	Peru	State	IL	Zip	61354
Country	USA				
Telephone	773 220 1530	Fax	347 823 8428		

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Stephen J Almada		
Signature	<i>Stephen J Almada</i>		
Date	12/8/03	Telephone	312 654 8468

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

 *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO : Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.